

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial) A. COX COMMUNICATIONS			Date of Disbursement MM DD YY 01 25 2016	
Mailing Address 1401 S 8TH STREET				
City ROGERS	State AR	Zip Code 72756-5333	Amount of Each Disbursement this Period 47.99	
Purpose of Disbursement INTERNET/PHONE EXPENSE		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17.I3595	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. FROST, PLLC			Date of Disbursement MM DD YY 01 15 2016	
Mailing Address 425 WEST CAPITOL AVE SUITE 3300				
City LITTLE ROCK	State AR	Zip Code 72201	Amount of Each Disbursement this Period 27.50	
Purpose of Disbursement PAYROLL SERVICES		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17.I3556	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) C. INTERNAL REVENUE SERVICE			Date of Disbursement MM DD YY 01 14 2016	
Mailing Address BRANCH OFFICE				
City KANSAS CITY	State MO	Zip Code 64999-0001	Amount of Each Disbursement this Period 3682.59	
Purpose of Disbursement TAXES AND WITHHOLDINGS		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17.I3586	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3758.08

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